

BARBARA K. CEGAVSKE Secretary of State Elections Division 101 North Carson Street, Suite 3 Carson City, Nevada 89701-3714 Phone: (775) 684-5705 Fax: (775) 684-5718 Website: www.nvsos.gov

State of Nevada
Committee for Political Action
(PAC)
Registration Form

Page 1

Office of the Secretary of State

Barbara Cegauste

Barbara Cegavske Elections Division

JStokes

12/31/2015

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			above space is for	Office USE ONLY
New Registration	PAC (Advocating	g Passage or Defeat	of a Ballot Question)	
Annual (Due on or before	January 15th of <u>each</u> y	ear; NRS 294A.230(4)(b))	
Amended Registration:	Ghange Officers	Change Reg	Change Registered Agent Change Address	
	Change Name	Previous Name of PAC		i
	Other:			ł
Name of Committee: Smrxy PAC		** C	Telephone:	
Malling Address: 3455 Cliff Shadows Parkway, Su Street Name, Number		Las Vegas City	, NV 89125 Siate Zip Con	
PAC Active Email Address: s:	rola@kenvinw.com		* **	1
PURPOSE: Briefly state the p Support candidates for public off				1
REGISTERED AGENT: purs agent, as provided in NR6 14.	uant to NRS 294A.240, .020, who must be a na	each PAC must app lural person who res	oint and keep in the State ides in the State of Nevada	a registered 1.
Name of Registered Agent: Mark H. Piorentino		TAGE	Telephone:	,
Physical Address: 1980 Festival Plaza Drive, Suito Street Name, Number	10	Lns Vogns	NV 8913	
REGISTERED AGENT ACCE Committee for Political Action X Bignature of Registered Agent			Registered Agent for the a	bove-named
- Official transferial said share				



BARBARA K. CEGAVSKE Secretary of State Elections Division 101 North Carson Street, Suite 3 Carson City, Nevada 89701-3714 Phone: (776) 684-6705 Fax: (778) 604-6718 yog,ecsyn,www :elisdeW

State of Nevada **Committee for Political Action** (PAC)

Registration Form

OFFICERS: List the name, title, address a necessary).	ınd telephone number of each offic	cer (attach additional pages if
Officer Name and Title:	20	494 I E
John A. Ritter, Chairman/Treasurer	7	Telephone:
Malling Address:	201	702-242-4949
3455 Cliff Shadows Parkway, Suite 220	Lns Voges	NV 89129
Street Name, Number	Cily	State Ztp Code
Officer Name and Title:		Telephone:
[. A		
Mailing Address:	p ·	3 8
Street Name, Number	City	 Siete Zip Code
Officer Name and Title:	,	Telephone:
		i giapitona.
Malling Address:		4
January 1, see a]:	, į
Sireal Name, Number	City	State Zip Code
Officer Name and Title:	-9	Telephone:
; Mailing Address;		
Misimily Address,	n ×	16 21
l Street Name, Number	City	Siate Zip Code
AFFILIATIONS: If the PAC is affiliated will of each organization (please attach addition Name of Organization: N/A	rany other organizations, list the r ial pages if necessary),	name, address and telephone numbo Telephone; ;
Malling Address:		: 1
Street Name, Number		
Name of Organization:	City	Sinie Zip Code
		Telephone;
Mailing Address:		ľ
		li k
Street Name, Number	City	Stale Zip Code
Name of Organization:		Telephone:
Malling Address:		. 1
Mailing Address:	.i 🥞	P 11
Street Name, Number	city	State Zip Code
SUBMITTED BY:		
X WWC .	Printed Name: Mark H. Florentino	Date: Telephone:
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EL400 Revised: 11-5-15		Pate 2 of 2